
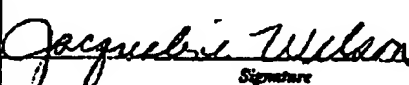
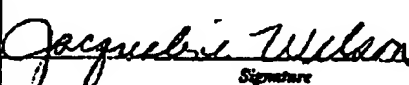
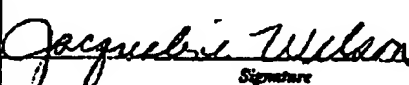


WFE  
ONLY

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. P14682-US1											
Applicant(s): Eduardo T. Sanchez, et al.															
Application No. 09/829,059	Filing Date April 9, 2001	Examiner Kwang Bin Yoo	Customer No. 27045	Group Art Unit 2667	Confirmation No. 8341										
Invention: System and Method for Managing a Plurality of Calls															
<b>COMMISSIONER FOR PATENTS:</b>															
Transmitted herewith is an amendment in the above-identified application.															
The fee has been calculated and is transmitted as shown below.															
<b>CLAIMS AS AMENDED</b>															
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE										
TOTAL CLAIMS	22	20	2	x \$0.00	\$100.00										
INDEP. CLAIMS	3	3	0	x \$200.0	\$0.00										
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>															
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$100.00</b>										
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 50-1379 in the amount of \$100.00 <input type="checkbox"/> A check in the amount of to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1379 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.															
 Sidney L. Weatherford Reg No. 46,602 Ericsson Inc. 6300 Legacy Drive, M/S EVR 1-C-11 Plano, TX 75024 9725837864			Dated: January 19, 2005												
04/04/2005 10:15:53 01 FC:1202 100.00 DA			<table border="1"> <thead> <tr> <th colspan="2">Certificate of Mailing or Transmittal</th> </tr> </thead> <tbody> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for First class or Express Mail in an envelope addressed to Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22312-1450, or being transmitted to the USPTO, on the date indicated herein.</td> </tr> <tr> <td colspan="2">             Signature </td> </tr> <tr> <td>Jacqueline Wilson</td> <td>01/19/2005</td> </tr> <tr> <td colspan="2">Depositor's Name and Date</td> </tr> </tbody> </table>			Certificate of Mailing or Transmittal		I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for First class or Express Mail in an envelope addressed to Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22312-1450, or being transmitted to the USPTO, on the date indicated herein.		 Signature		Jacqueline Wilson	01/19/2005	Depositor's Name and Date	
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 Signature															
Jacqueline Wilson	01/19/2005														
Depositor's Name and Date															

PT1/LARGE/REV07

09/829059

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

32944-00048 USPT

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	18	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	18 minus 20 =	0
INDEPENDENT CLAIMS	2 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE ☐OR OTHER THAN  
SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL		OR	TOTAL	710

## CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	22	Minus 20	= 2
Independent	3	Minus 3	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY OR

OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	100
X40=		OR	X80=	0
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	100

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	=
Independent		Minus	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	=
Independent		Minus	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.